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APPLICANTS Karl Belliard, Bordeaux, FRANCE; Regis Le Couedic, Andresy, FRANCE; Jacques Senegas, Merignac, FRANCE; Paolo Mangione, Pessac, FRANCE;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS ***** FRANCE 03 09596 08/04/2003				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 03/24/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged	Examiner's Signature _____ Initials _____	STATE OR COUNTRY FRANCE	SHEETS DRAWING 18	TOTAL CLAIMS 25
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TITLE INTERVERTEBRAL DISK PROSTHESIS				
FILING FEE RECEIVED 538	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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